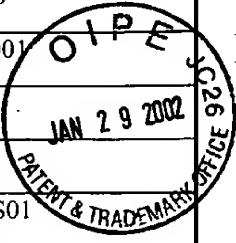


Applicant	Frankie Roohparvar
Serial No.	09/829,136
Filing Date	April 9, 2001
Group Art Unit	2184
Examiner Name	Unknown
Attorney Docket No.	400.017US01
Title: SYNCHRONOUS FLASH MEMORY WITH TEST CODE INPUT	



INFORMATION
DISCLOSURE STATEMENT
TRANSMITTAL

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Commissioner for Patents
Washington, DC 20231

Enclosures

The following documents are enclosed:

- An Information Disclosure Statement (1 pg.); Form 1449 (1 pg.); copies of 17 cited references listed thereon.
 A return postcard.

Please charge any additional fees or credit any overpayments to Deposit Account No. 501373.

CUSTOMER NO. 27073

Submitted By

Name	Russell D. Slifer	Reg. No.	39,838	Telephone	(612) 312-2202
Signature				Date	1/18/02

Attorneys for Applicant
 Fogg Slifer, Polglaze, Leffert & Jay, PA
 P.O. Box 581009
 Minneapolis, MN 55458-1009
 T - 612/312-2200
 F - 612/312-2250

Certificate of Mailing

I certify that this correspondence, and the documents identified above, are being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on January 8, 2002

Name	Frayda M. Nitschke	Signature	
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Applicant	Frankie Roohparvar	 INFORMATION DISCLOSURE STATEMENT
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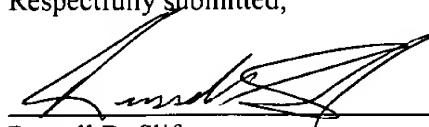
In compliance with 37 C.F.R. §§ 1.56 and 1.97, *et seq.*, the materials listed on the attached Form 1449 are brought to the attention of the Examiner for consideration in connection with the above-identified Application. Applicant respectfully requests that this Information Disclosure Statement be entered and the references listed on the attached Form 1449 be considered by the Examiner and made of record. Pursuant to MPEP §609, Applicant requests that the Examiner initial next to each reference on the Form 1449 to indicate that the listed references have been considered. Applicant further requests that a copy of the initialed Form 1449 be returned with the next official communication.

Under 37 C.F.R. § 1.97(b)(3), it is believed that no fee or certificate is required with this Information Disclosure Statement. However, if an Office Action on the merits has been mailed, the Commissioner is hereby authorized to charge any fees deemed necessary or credit any overpayment to Deposit Account No. 501373.

The Examiner is invited to contact the Applicant's Representative at the below-listed telephone number if they are any questions regarding this communication.

Respectfully submitted,

Date: 1/8/02


 Russell D. Slifer
 Reg. No. 39,838

Attorneys for Applicant
 Fogg Slifer Polglaze Leffert & Jay, P.A.
 P.O. Box 581009
 Minneapolis, MN 55458-1009
 T - 612/312-2200
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